PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90106 029 ***150.00

DOCU	MENT # P	96000	053343				
1. Corporation	Name BERGLASS, INC						
L.0.0. 1 1	DEHOLAGO, INC	•			E I BANGAN KAN KANA ANYA ARYA BANK BANK ARAK AR	81 811 8 8 11 8 8 11 11 1	
Principal Place			Mailing Address				
951 W. 13TH ST. 951 W. 13 UNIT #3 UNIT #3			951 W. 13TH ST.				
0			RIVIERA BEACH FL 33404		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
	 				06/17/1996 4. FEI Number	1 1	r lied For
2. Principa Place of Business			2a. Mailing Address		65-0675816	<u> </u>	t Applicable
21 951 W. 13 th 5t. Suite, Apt. #, etc.			Suite, Apt. #, etc.		_	\$8.75	
22 Wit # 2			27		5. Certifcate of Status Desired	Fee Re	ľ
City & State			City & State		6. Election Campaign Financing	\$5.00	May Be
23 Rivie	era Beach	, FL_			Trust Fund Contribution	Added t	c Fees
Zip	Cour		Zip	Country	8. This corporation owes the current year		□No
24 3340				30	Persor al Property Tax. 10. Name and Address of New Registere	☐ Yes	171/10
	9. Name and Add	ress of Curre	nt Registered Agent	81 Name	· · · ·	u Aguit	
RAMPO LOUIS E					Kombo, Lowis F.		
951 W. 13TH ST.				82 Street A	Acdress (P.O. Box Number is Not Acceptable)		
UNIT #3				83			
RIVIERA BEACH FL 33404					<u>unit #2</u>	los Zin (2-4-
1				84 City	iviera Beach F	L 85 Zip (1101
11. Pursuant to the provisions of Scictions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the Spaciof Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the original acce							
office or re	egistered agent, or bo	h, in the State	r of Florida: Such change was at attack of, Section 607,0505, Flor	uthorized by the corpo ida Statutes.	ration's board of directors. I hereby accept the app	ointment as re	gistered
				owis F. f		2.99	
SIGNATORE	Signature, typed of printed na	ne of registered ag	ent and title if applicable (NOT ::	***	3,		
12.		OFFICERS A	NE) DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS PSTD	TChange	Addition
TITLE	PSTD		C) petric	12 NAME	Rombo Louis F.		
NAME	RAMBO, LOUIS F 951 W. 13TH ST.,			1.3 STREET ADDRESS	951 W. 13th St. #2		
STREET ADDRE 3S	RIVIERA BEACH F			1,4 CITY-ST-ZIP	Riviero Beach FL 3	3404	
CITY-ST-ZIP TITLE	MINIEUN DENCIT	L 30707	☐ DELETE	2.1 TITLE	1 117105 000011	Change	Addition
NAME				2.2 NAME			}
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2. 4 CITY-ST-ZIP			
TITLE			☐ DELETE	3.1 TITLE		Change	Addition
NAME				3.2 NAME			
STREET ADDRE IS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4. CITY-ST-ZIP		Change	Addition
TITLE			☐ DELETE	41 TITLE		Change	Addition
NAME				4, 2 NAME			
STREET ADDRESS				4,3 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP 51 TITLE		☐ Change	Addition
NAME				5.2 NAME		•	
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5 4 CITY-ST-ZIP			
TITLE	**.		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP	}			6.4 CITY-ST-ZIP		_ 	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attach nent with a supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to accurate this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attach nent with a supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to a secure this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attach nent with a secure of the corporation of the corporation or the receiver or trustee empowered to a secure of the corporation of the corporation or the receiver or trustee empowered to a secure of the corporation or the receiver or trustee.

SIGNATURE: x SIGNATURE AND TYPED

<u> 561 - 848 - 5803</u>